

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 113 OF 181

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Ribble For Congress

Full Name (Last, First, Middle Initial)

Timothy Eckels

Mailing Address 33 Oak Ln

City

Springfield

State

IL

Zip Code

62712-8611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hospital Sisters HealthOccupation
Vice President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		08		2013

Transaction ID : AFB4D971B3EC046FEBB6

Amount of Each Receipt this Period

250.00

Earmarked (Non-Directed)

A.

Full Name (Last, First, Middle Initial)

Wisconsin Hospital Association Inc. PAC

Mailing Address 5510 Research Park Drive

City

Fitchburg

State

WI

Zip Code

53711-5377

FEC ID number of contributing
federal political committee.

C C00422881

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		08		2013

Transaction ID : A6C68E1BCFFBF42E9BAE

Amount of Each Receipt this Period

4975.00

Conduit Memo Total

[MEMO ITEM]

Conduit Memo

B.

Full Name (Last, First, Middle Initial)

Jeremy Normington

Mailing Address 2579 Fisherman Trail

City

Friendship

State

WI

Zip Code

53934-9587

FEC ID number of contributing
federal political committee.

C

Name of Employer
Moundview Memorial Hospital and ClinicOccupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		12		2013

Transaction ID : A1A95E88B719B4C7E9C8

Amount of Each Receipt this Period

250.00

Earmarked (Non-Directed)

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00